

PRE-REGISTRATION INFORMATION

SCHOOL YEAR: _____

RESIDENCY/PARENT INFORMATION

Are you currently living in Mansfield? ☐ yes ☐ no

IF YES:

Mansfield Address: _____
and Street Town , Zip code

I currently: ☐ own this home ☐ rent this home ☐ live with relatives ☐ other: _____

IF NO:

When will you be moving in? Date: _____

Mansfield Address: _____
and Street Town , Zip code

I will: ☐ purchase this home ☐ rent this home ☐ live with relatives ☐ other: _____

Parent #1: _____
First Last ☐ mother ☐ father ☐ other: _____

Lives with child? ☐ yes ☐ no Phone: _____ email: _____

Parent #2: _____
First Last ☐ mother ☐ father ☐ other: _____

Lives with child? ☐ yes ☐ no Phone: _____ email: _____

Former Residence _____

Former School: _____

STUDENT INFORMATION

1. Name of Child: _____
First Middle Last

☐ Male ☐ Female Date of Birth: ____/____/____ Will enter Grade: (circle one) K 1 2 3 4
month day year

Has your child ever been identified/placed in any of the following: ☐ yes, as indicated below ☐ no

☐ Special Education Program ☐ Speech/Language
☐ Title I: (circle one) Math Reading ☐ Counseling
☐ Enrichment ☐ Other (Academic Interventions, etc.) _____

Does your child have an I.E.P or 504? ☐ No ☐ Yes: _____

What is your child's dominant language? ☐ English ☐ Other: _____

If other, does your child speak fluent English or does he/she need help with the English language?

☐ Fluent ☐ Needs help Please explain: _____

2. Name of Child: _____
First Middle Last

☐ Male ☐ Female Date of Birth: ____/____/____ Will enter Grade: (circle one) K 1 2 3 4
month day year

Has your child ever been identified/placed in any of the following: ☐ yes, as indicated below ☐ no

☐ Special Education Program ☐ Speech/Language
☐ Title I: (circle one) Math Reading ☐ Counseling
☐ Enrichment ☐ Other (Academic Interventions, etc.) _____

Does your child have an I.E.P or 504? ☐ No ☐ Yes: _____

What is your child's dominant language? ☐ English ☐ Other: _____

If other, does your child speak fluent English or does he/she need help with the English language?

☐ Fluent ☐ Needs help Please explain: _____

3. Name of Child: _____
First Middle Last

☐ Male ☐ Female Date of Birth: ____/____/____ Will enter Grade: (circle one) K 1 2 3 4
month day year

Has your child ever been identified/placed in any of the following: ☐ yes, as indicated below ☐ no

☐ Special Education Program ☐ Speech/Language
☐ Title I: (circle one) Math Reading ☐ Counseling
☐ Enrichment ☐ Other (Academic Interventions, etc.) _____

Does your child have an I.E.P or 504? ☐ No ☐ Yes: _____

What is your child's dominant language? ☐ English ☐ Other: _____

If other, does your child speak fluent English or does he/she need help with the English language?

☐ Fluent ☐ Needs help Please explain: _____

4. Name of Child: _____
First Middle Last

☐ Male ☐ Female Date of Birth: ____/____/____ Will enter Grade: (circle one) K 1 2 3 4
month day year

Has your child ever been identified/placed in any of the following: ☐ yes, as indicated below ☐ no

☐ Special Education Program ☐ Speech/Language
☐ Title I: (circle one) Math Reading ☐ Counseling
☐ Enrichment ☐ Other (Academic Interventions, etc.) _____

Does your child have an I.E.P or 504? ☐ No ☐ Yes: _____

What is your child's dominant language? ☐ English ☐ Other: _____

If other, does your child speak fluent English or does he/she need help with the English language?

☐ Fluent ☐ Needs help Please explain: _____